

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
**Tim Scott for Senate**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015	
Mailing Address 3180 18th Street		Amount of Each Disbursement this Period 221.95	
City San Francisco	State CA	Zip Code 94110-2043	Transaction ID : BB116E2DD49BB4C9DB93
Purpose of Disbursement Merchant Fees		003	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Sherry Long</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015	
Mailing Address 8285 Little Sydneys Way		Amount of Each Disbursement this Period 500.00	
City North Charleston	State SC	Zip Code 29406-8924	Transaction ID : B7F5C177A65304863844
Purpose of Disbursement Field Representative		001	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Hayden Cagan</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015	
Mailing Address 1381 Tara Road		Amount of Each Disbursement this Period 403.83	
City Charleston	State SC	Zip Code 29407-5131	Transaction ID : B56A627A3FBA14A0C819
Purpose of Disbursement Staff Assistant		001	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1125.78